

**OBJECTION TO APPLICATION****INSTRUCTIONS**

Use this form when objecting to an application for a water use permit, change authorization or reservation of water. Use one form for each application.

A person has standing to file an objection if his or her property, water rights, or interests would be adversely affected by the proposed appropriation. Individual water right owners must file separate objections.

**A CORRECT AND COMPLETE OBJECTION FORM MUST BE RECEIVED OR POSTMARKED ON OR BEFORE THE DEADLINE SPECIFIED IN THE PUBLIC NOTICE.**

**FILING FEE: \$25.00**

**FOR DEPARTMENT USE ONLY**

Postmarked Date \_\_\_\_\_  
 Date Received \_\_\_\_\_  
 Rec'd By \_\_\_\_\_  
 Fee Rec'd \_\_\_\_\_  
 Check No. \_\_\_\_\_  
 Transmittal No. \_\_\_\_\_  
 Refund \_\_\_\_\_

**1. NAME OF OBJECTOR** \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Other Phone \_\_\_\_\_

**2. APPLICATION BEING OBJECTED TO**

a) Type of Application: Permit ☐ Authorization to Change ☐ Reservation of Water ☐

b) Application No. \_\_\_\_\_

c) Name of Applicant \_\_\_\_\_

d) Source of Water \_\_\_\_\_ County \_\_\_\_\_

**3. STATE THE FACTUAL BASIS OF YOUR OBJECTION**

a) OBJECTION TO PERMIT APPLICATION must provide facts tending to show one or more of the criteria in Section 85-2-311, MCA are not met.

b) OBJECTION TO CHANGE APPLICATION must provide facts tending to show one or more of the criteria in Section 85-2-402, MCA are not met.

c) OBJECTION TO APPLICATION RESERVATION OF WATER must provide facts tending to show one or more of the criteria in Section 85-2-316, MCA are not met.

NOTE: Water quality objections must contain substantial credible information establishing to the satisfaction of the department that the water quality criteria cannot be met by the applicant.

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4. **STATE THE BASIS OF YOUR WATER RIGHT**, if you are claiming your water right will be affected.

☐ (W) Statement of Claim No. \_\_\_\_\_

☐ (P) Permit to Appropriate Water No. \_\_\_\_\_

☐ (C) Certificate of Water Right No. \_\_\_\_\_

☐ (Y/D) Final Decree No. \_\_\_\_\_

☐ (M/R) Reservation of Water No. \_\_\_\_\_

☐ (E) Exempt Existing Water Right (no claim filed; complete items below)

Date of First Use: \_\_\_\_\_

Name of Appropriator: \_\_\_\_\_

Type of Use:      Stock ☐                      Domestic ☐

Amount Used:      Flow Rate \_\_\_\_\_ Gallons Per Minute;      Volume \_\_\_\_\_ Acre-Feet

Point of Diversion:

\_\_\_\_\_ 1/4 \_\_\_\_\_ 1/4 \_\_\_\_\_ 1/4 Section \_\_\_\_\_, Twp \_\_\_\_\_ N/S, Rge \_\_\_\_\_ E/W, \_\_\_\_\_ County

Lot \_\_\_\_\_ Block \_\_\_\_\_ Tract No. \_\_\_\_\_ Subdivision Name \_\_\_\_\_

5. **STATE ANY CONDITIONS OR MODIFICATIONS UNDER WHICH YOU WOULD AGREE TO THE ISSUANCE OF THE PERMIT, AUTHORIZATION TO CHANGE, RESERVATION, OR EXTENSION OF TIME.**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

6. **OBJECTOR'S SIGNATURE** \_\_\_\_\_ **DATE** \_\_\_\_\_

7. **ARE YOU REPRESENTED BY COUNSEL?**      **YES** ☐      **NO** ☐

8. **PERSON PREPARING THIS FORM**, if different from objector      9. **COUNSEL**, if any

Name _____	Name _____
Mailing Address _____	Mailing Address _____
City, State, Zip _____	City, State, Zip _____
Phone _____	Phone _____

**WATER RESOURCES REGIONAL OFFICES**

**Billings**

1537 Avenue D, Suite 121  
Billings, MT 59102  
Phone: 406-657-2105  
Fax: 406-245-2064  
Serving: Big Horn, Carbon, Carter  
Custer, Fallon, Powder River, Prairie,  
Rosebud, Stillwater, Sweet Grass,  
Treasure, and Yellowstone Counties

**Bozeman**

151 Evergreen Drive, Suite C  
Bozeman, MT 59715  
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Fax: 406-587-9726  
Serving: Gallatin, Madison, and  
Park Counties

**Glasgow**

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Roosevelt, Sheridan, Valley, and  
Wibaux Counties

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Fax: 406-265-2225  
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Teton, and Toole Counties

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Phone: 406-449-0944  
Fax: 406-442-9315  
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Deer Lodge, Jefferson, Lewis and  
Clark, Powell, and Silver Bow Counties

**Kalispell**

109 Cooperative Way, Suite 110  
Kalispell, MT 59901-2387  
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Fax: 406-752-2843  
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and Sanders Counties

**Lewistown**

613 NE Main Street, Suite E  
Lewistown, MT 59457-2020  
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Fax: 406-538-7089  
Serving: Cascade, Fergus, Golden  
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Musselshell, Petroleum, and  
Wheatland Counties

**Missoula**

Town and Country Shopping Center  
1610 South 3rd Street West, Suite 103  
P.O. Box 5004  
Missoula, MT 59806-5004  
Phone: 406-721-4284  
Fax: 406-542-1496  
Serving: Granite, Mineral,  
Missoula, and Ravalli Counties

For Mailing, Use Post Office Box Number.